

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

C.A.D.0.8.6.5.1.0.0.0.5

Manifest Document No.

911050

2. Page 1

of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
McDonnell Douglas Aircraft Co.
19503 S. Normandie Avenue
Torrance, CA 90502

4. Generator's Phone (213) 533-6677 K. L. Anderson 722 M/S C6-10

5. Transporter 1 Company Name
J.C.I. Environmental Services

6. US EPA ID Number

C.A.D.0.5.8.0.1.8.3.6.7

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address
Chem Tech Systems, Inc.

3650 E. 26th St.
Vernon, CA 90023

10. US EPA ID Number

C.A.T.0.8.0.9.1.3.6.8.1

A. State Manifest Document Number

89476890

B. State Generator's ID

H.A.H.Q.3.6.0.0.5.6.9.8

C. State Transporter's ID

013928

D. Transporter's Phone (213) 268-3137

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

C.A.T.0.8.0.9.1.3.6.8.1

H. Facility's Phone

(213) 268-3387

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. Hazardous Waste Liquid, n.e.s., ORM-E, NA9100

12. Containers
No. Type

0 10 1 T T

13. Total
Quantity

0 15 10 10 10

14. Unit
Wt/Vol

G

I. Waste No.

State 461

EPA/Other Cal. Reg.

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

Alkaline 2X
Paint Solids 5X
Oil 1X
Water Remainder

K. Handling Codes for Wastes Listed Above

a. 01

c.

d.

15. Special Handling Instructions and Additional Information

Guide # 31
Use gloves, goggles, &
respirator.
B1544

PROFILE #P.Booth

HAULER 1918
SITE

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Kris L. Anderson Agent for M.D.A.C.

Signature

[Signature]

Month Day Year

02 02 90

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Jim Larson

Signature

[Signature]

Month Day Year

10 20 1990

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

10 20 1990

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Robert Plant



Signature

[Signature]

Month Day Year

10 20 1990

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C,A,D,0,8,6,5,1,0,0,0,5		Manifest Document No. 911030		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address McDonnell Douglas Aircraft Co. 19503 S. Normandie Avenue Torrance, CA 90502						A. State Manifest Document Number 89476890			
4. Generator's Phone (213) 533-6677 K. L. Anderson 722 M/S C6-10						B. State Generator's ID H,A,H,Q,3,6,0,0,5,6,9,8			
5. Transporter 1 Company Name J.C.I. Environmental Services			6. US EPA ID Number C,A,D,0,5,8,0,1,8,3,6,7			C. State Transporter's ID 013928		D. Transporter's Phone (213)268-3137	
7. Transporter 2 Company Name			8. US EPA ID Number			E. State Transporter's ID		F. Transporter's Phone	
9. Designated Facility Name and Site Address Chem Tech Systems, Inc. 3650 E. 26th St. Vernon, CA 90023						10. US EPA ID Number C,A,T,0,8,0,0,3,3,6,8,1			
						G. State Facility's ID			
						H. Facility's Phone (213)268-3387			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)					12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	
a. Hazardous Waste Liquid, n.o.s., ORM-E, NA9189					0	1	T	0	5
					0	5	0	0	0
					6	Cal. Reg.			
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above Alkaline 2X Paint Solids 5X Oil 1X Water Remainder					K. Handling Codes for Wastes Listed Above a. b. c. d.				
15. Special Handling Instructions and Additional Information Guide # 31 Use gloves, goggles, & respirator. B1544									
PROFILE #P.Booth HAULER 1918 SITE									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name Kris L. Anderson Agent for M.D.A.C.					Signature 			Month Day Year 9 2 9 2 9 0	
17. Transporter 1 Acknowledgement of Receipt of Materials									
Printed/Typed Name Jim Larson					Signature 			Month Day Year 10 20 90	
18. Transporter 2 Acknowledgement of Receipt of Materials									
Printed/Typed Name					Signature			Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name					Signature			Month Day Year	